

# FEC FORM 3X

## REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Rely on Your Beliefs Fund

ADDRESS (number and street) ▼

209 Pennsylvania Avenue, SE

☐ Check if different than previously reported. (ACC)

Washington

DC

20003

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00344648

3. IS THIS REPORT

☒

NEW (N)

OR

☐

AMENDED (A)

### 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)

☐ July 15  
Quarterly Report (Q2)

☐ October 15  
Quarterly Report (Q3)

☐ January 31  
Year-End Report (YE)

☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)

☐ Termination Report  
(TER)

(b) Monthly  
Report  
Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☒ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Paul Kilgore

Signature of Treasurer

Paul Kilgore

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only

FEC FORM 3X  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Rely on Your Beliefs Fund

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
07 / 01 / 2012 To: M M / D D / Y Y Y Y Y Y  
07 / 31 / 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2012</span>		<span style="border: 1px solid black; padding: 2px;">200806.26</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">316083.94</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">11000.00</span>	<span style="border: 1px solid black; padding: 2px;">393750.00</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">327083.94</span>	<span style="border: 1px solid black; padding: 2px;">594556.26</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">11757.21</span>	<span style="border: 1px solid black; padding: 2px;">279229.53</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">315326.73</span>	<span style="border: 1px solid black; padding: 2px;">315326.73</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Rely on Your Beliefs Fund

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y  
07 / 01 / 2012

To:

M M / D D / Y Y Y Y Y  
07 / 31 / 2012
**I. Receipts**
**COLUMN A**  
**Total This Period**
**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

4000.00

42250.00

(ii) Unitemized .....

0.00

500.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

4000.00

42750.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

7000.00

346000.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

11000.00

388750.00

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

5000.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3) .....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

11000.00

393750.00

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

11000.00

393750.00

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	11757.21	180729.53
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	11757.21	180729.53
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	98500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	11757.21	279229.53
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11757.21	279229.53

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	11000.00	388750.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	11000.00	388750.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	11757.21	180729.53
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	11757.21	180729.53

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 15

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Rely on Your Beliefs Fund**

Full Name (Last, First, Middle Initial)

**A. Michael Chappell**

Mailing Address 5400 Macomb St NW

City

Washington

State

DC

Zip Code

20016-5307

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Fierce Isakowitz &amp; Blalock

Occupation

Lobbyist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 17 / 2012

Transaction ID : 20717.C1406

Amount of Each Receipt this Period

1000.00

Receipt

Full Name (Last, First, Middle Initial)

**B. Samantha Cook**

Mailing Address 5400 Macomb St NW

City

Washington

State

DC

Zip Code

20016-5307

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SMC Consulting

Occupation

Principal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 17 / 2012

Transaction ID : 20717.C1405

Amount of Each Receipt this Period

1000.00

Receipt

Full Name (Last, First, Middle Initial)

**C. David Hobbs**

Mailing Address 101 Constitution Ave NW Ste 900

City

Washington

State

DC

Zip Code

20001-2133

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Hobbs Group

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 25 / 2012

Transaction ID : 20817.C1407

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 7 OF 15

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Rely on Your Beliefs Fund**

Full Name (Last, First, Middle Initial)

**A. Daniel Meyer**

Mailing Address 2506 Duxbury Pl

City

Alexandria

State

VA

Zip Code

22308-2138

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Duberstein Group

Occupation

Lobbyist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 25 / 2012

**Transaction ID : 20817.C1408**

Amount of Each Receipt this Period

1000.00

Receipt

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1000.00

4000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 8 OF 15

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Rely on Your Beliefs Fund**

Full Name (Last, First, Middle Initial)

## **A. Eli Lilly and Co. PAC**

Mailing Address 555 12th St NW Ste 650

City  
Washington

State Zip Code  
DC 20004-1209

FEC ID number of contributing  
federal political committee.

**C** C00082792

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4500.00

Date of Receipt

**07** / **25** / **2012**

**Transaction ID : 20817.C1409**

Amount of Each Receipt this Period

2000.00

Receipt

Full Name (Last, First, Middle Initial)

## **B. National Cable & Telecommunications PAC**

Mailing Address 25 Massachusetts Ave NW Ste 100

City  
Washington

State Zip Code  
DC 20001-1434

FEC ID number of contributing  
federal political committee.

**C** C00010082

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**07** / **25** / **2012**

**Transaction ID : 20817.C1410**

Amount of Each Receipt this Period

5000.00

Receipt

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City

State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

7000.00

7000.00



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 15

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Rely on Your Beliefs Fund**

Full Name (Last, First, Middle Initial)

**A. Aristotle International**

Mailing Address 205 Pennsylvania Ave SE

City  
WashingtonState  
DCZip Code  
20003-1164Purpose of Disbursement  
PAC CC Transaction Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		30		2012

**Transaction ID : 20817.E2366**

Amount of Each Disbursement this Period

150.00
--------

PAC CC TRANSACTION FEES

Full Name (Last, First, Middle Initial)

**B. Roy Blunt**

Mailing Address PO Box 50100

City  
SpringfieldState  
MOZip Code  
65805-0100Purpose of Disbursement  
PAC Travel Expenses

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		24		2012

**Transaction ID : 20817.E2349**

Amount of Each Disbursement this Period

65.54
-------

PAC TRAVEL EXPENSES

Full Name (Last, First, Middle Initial)

**C. Capital Eagle**

Mailing Address 2815 V St NE

City  
WashingtonState  
DCZip Code  
20018-1516Purpose of Disbursement  
PAC Event Beverages

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		24		2012

**Transaction ID : 20817.E2347**

Amount of Each Disbursement this Period

249.35
--------

PAC EVENT BEVERAGES

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

464.89

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 15

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Rely on Your Beliefs Fund**

Full Name (Last, First, Middle Initial)

**A. Disney Destinations**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		19		2012

Mailing Address 1375 East Buena Vista Dr

City	State	Zip Code
Orlando	FL	32836-

Purpose of Disbursement  
PAC Lodging

Candidate Name

Category/  
Type**Transaction ID : 20817.E2350**

Amount of Each Disbursement this Period

1000.00
---------

PAC LODGING

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. Hammons Product Company**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		24		2012

Mailing Address PO Box 872891

City	State	Zip Code
Kansas City	MO	64187-2891

Purpose of Disbursement  
PAC Event Supplies

Candidate Name

Category/  
Type**Transaction ID : 20817.E2345**

Amount of Each Disbursement this Period

216.45
--------

PAC EVENT SUPPLIES

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C. Professional Data Services, Inc.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		30		2012

Mailing Address 2470 Daniels Bridge Rd Ste 121

City	State	Zip Code
Athens	GA	30606-6188

Purpose of Disbursement  
PAC Compliance Consulting

Candidate Name

Category/  
Type**Transaction ID : 20817.E2367**

Amount of Each Disbursement this Period

3018.36
---------

PAC COMPLIANCE CONSULTING

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4234.81
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 15

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Rely on Your Beliefs Fund**

Full Name (Last, First, Middle Initial)

**A. Verizon Wireless**

Mailing Address PO Box 19769

City	State	Zip Code
Irvine	CA	92623-9769

Purpose of Disbursement  
PAC Telephone

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		24		2012

**Transaction ID : 20817.E2348**

Amount of Each Disbursement this Period

152.91
--------

PAC TELEPHONE

**B. Visa**

Mailing Address PO Box 4512

City	State	Zip Code
Carol Stream	IL	60197-4512

Purpose of Disbursement  
See Below

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		17		2012

**Transaction ID : 20717.E2331**

Amount of Each Disbursement this Period

6358.57
---------

SEE BELOW

**C. W Millar and Co Catering**

Mailing Address 1335 14th St NW

City	State	Zip Code
Washington	DC	20005-3610

Purpose of Disbursement  
PAC Event Catering

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		17		2012

**Transaction ID : 20717.E2332**

Amount of Each Disbursement this Period

643.27
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**[MEMO ITEM]**

MEMO: PAC EVENT CATERING

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6511.48
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<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

## Rely on Your Beliefs Fund

1691.55

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**[MEMO ITEM]**  
MEMO: PAC EVENT CATERING

MM / DD / YYYY

41.56

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

**[MEMO ITEM]**  
MEMO: PAC SHIPPING

07 / 17 / 2012


1346.21

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

**[MEMO ITEM]**  
MEMO: PAC PRINTING

0.00

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 15

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**Rely on Your Beliefs Fund**

Full Name (Last, First, Middle Initial)

**A. Bistro Bis**

Mailing Address 15 E St NW

City  
WashingtonState  
DCZip Code  
20001-1501Purpose of Disbursement  
PAC Event Catering

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:                  District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07      17      2012
**Transaction ID : 20717.E2336**

Amount of Each Disbursement this Period

75.23

**[MEMO ITEM]**

MEMO: PAC EVENT CATERING

Full Name (Last, First, Middle Initial)

**B. Great Southern Travel**

Mailing Address 3424 S National Ave

City  
SpringfieldState  
MOZip Code  
65807-7307Purpose of Disbursement  
PAC Travel Expenses

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:                  District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07      17      2012
**Transaction ID : 20717.E2337**

Amount of Each Disbursement this Period

100.00

**[MEMO ITEM]**

MEMO: PAC TRAVEL EXPENSES

Full Name (Last, First, Middle Initial)

**C. Frontier Air**

Mailing Address 7001 Tower Rd

City  
DenverState  
COZip Code  
80249-7312Purpose of Disbursement  
PAC Airfare

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:                  District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07      17      2012
**Transaction ID : 20717.E2338**

Amount of Each Disbursement this Period

1551.80

**[MEMO ITEM]**

MEMO: PAC AIRFARE

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**Rely on Your Beliefs Fund**

Full Name (Last, First, Middle Initial)

**A. AT&T**

Mailing Address PO Box 6463

City Carol Stream      State IL      Zip Code 60197-6463

Purpose of Disbursement  
PAC Telephone

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07      17      2012
**Transaction ID : 20717.E2339**

Amount of Each Disbursement this Period

99.85

**[MEMO ITEM]**

MEMO: PAC TELEPHONE

Full Name (Last, First, Middle Initial)

**B. Senate Dining Room**

Mailing Address U.S. Capitol Building

City Washington      State DC      Zip Code 20001-

Purpose of Disbursement  
PAC Meeting Expense

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07      17      2012
**Transaction ID : 20717.E2340**

Amount of Each Disbursement this Period

135.45

**[MEMO ITEM]**

MEMO: PAC MEETING EXPENSE

Full Name (Last, First, Middle Initial)

**C. US Airways**

Mailing Address 4000 E Sky Harbor Blvd

City Phoenix      State AZ      Zip Code 85034-3802

Purpose of Disbursement  
PAC Airfare

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07      17      2012
**Transaction ID : 20717.E2342**

Amount of Each Disbursement this Period

50.00

**[MEMO ITEM]**

MEMO: PAC AIRFARE

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**Rely on Your Beliefs Fund**

Full Name (Last, First, Middle Initial)

**A. Dan Williams**

Mailing Address 209 Pennsylvania Ave SE

City  
Washington

State  
DC

Zip Code  
20003-1107

Purpose of Disbursement  
PAC Rent & Phones

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 17 / 2012

**Transaction ID : 20717.E2330**

Amount of Each Disbursement this Period

532.62

PAC RENT & PHONES

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

532.62

11743.80